First Things First

"I get up every morning determined to both change the world and to have one hell of a good time. Sometimes, this makes planning the day difficult."

— E. B. White

As we look to the New Year, we eagerly await (or brace for) change in Washington. Good, bad or indifferent, change is likely in many areas that affect our practices and patients. To the extent that internists and subspecialists “matter” to patients, we need not fear change. And as long as we take good care of our patients and take the time to educate them about the importance of their health and our work, we will “matter.” Whether preventing, managing or curing disease, what we do is important and our patients value our care. One side effect of the separation of patient and payer is that situations can arise in which our customer (the payer) and our patient have divergent interests. Fortunately, these are rare, but when they do occur we must fully inform our patient and do our best to get them the care they need.

Skilled, comprehensive and compassionate care and patient advocacy form the foundation for our profession.

Having established our value with patients, we can turn our attention to payers. For the most part, the priorities of patients and payers are aligned because in aggregate, high quality care is cost effective. Quality metrics, dashboards, and even the mysterious P4P (pay for performance) programs are nothing more than attempts to measure...

Winter 2008: The Results Are In!

In the spirit of the recent elections, we decided to do a poll of our membership. Your ballots have now been tabulated, and the results are interesting – even surprising! Let me tell you what we learned.

The annual Texas Chapter Scientific Meeting is one of our principal missions. The recent session at the Fairmont Hotel in Dallas was outstanding and attracted a record number of registrants. Those who attended heard excellent presentations from distinguished faculty. Nevertheless, we’re always looking for ways to improve the format, and especially to build attendance. The more internists who attend and participate, the stronger our organization will be.

Frankly, we have been somewhat in the dark regarding what Texas ACP members want from their meeting. Are they seeking a mini-vacation? Is a weekend schedule desirable or not? Should the meeting move to new venues around the state? Should it cover business-of-medicine issues, or continue with straightforward, no frills CME?

So, collaboratively, we designed a brief survey in October 2008, soliciting items from members of the Texas Chapter Board. In the end, we came up with 13 questions. On November 3rd, the survey was distributed to the approximately 4000 Members, Fellows, and Masters in Texas who have email addresses. We emailed it a second time on December 10. Thanks to the 175 of you who have responded thus far.

Unexpected Correspondence

Brent Lacey, San Antonio

Editor’s note: This account is entirely fictional. Names and situations have been invented for the purposes of this essay.

I turned to face her. Lying in front of me, motionless, was the red-haired woman on whom I had just finished operating. She was a tragic case, an elderly woman with brain cancer. What did I know about her other than that she had stage III glioblastoma multiforme? Was she a grandmother? Did she like to travel? What hobbies did she have? I wish there had been time to talk to her about her life and not just her medical conditions. I’ve spent so much time these past few weeks trying to learn medicine that I haven’t taken the time to think of her as a person.

Should I have talked to her more? Of course, she’s the quiet type, so maybe I wouldn’t have learned much from her anyway.

We removed our gloves, washed our hands, and started to straighten up the room before leaving. I walked back to her and surveyed our handiwork. Even I had to smile. It was a pretty well done procedure, considering it was done by a novice. I helped to cover her up. The senior professor came back in the room and called our team to

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On Being a Doctor

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Three distinguished members were honored with the Texas Chapter highest awards during November 2008 Annual Chapter Scientific Meeting in Dallas.

Texas Chapter Laureates for 2008 are Spencer Berthelsen, MD, FACP, Houston; Herbert DuPont, MD, MACP, Houston; and Dorothy Sherwood, MD, FACP, Dallas.

The Laureate Award honors those Fellows and Masters of the College who have demonstrated a life of commitment to excellence in medical care, education, or research; and in service to their community, the Chapter, and the ACP.

Fred Campbell, MD, FACP, San Antonio and Thomas McHorse, MD, Austin were honored with the Chapter Volunteerism and Community Service Award.

The Volunteerism and Community Service Award honors Texas Chapter members who have demonstrated an abiding commitment to excellence in medical care, education, research, and dedicated service to their community, the Chapter, and the ACP.

The Texas Chapter of the ACP Services Chumley/Synder Advocate of the Year award was presented to William Deaton, MD, Austin, for his outstanding leadership in legislative advocacy and grassroots activism on behalf of medicine and the patients of Texas.

The Awards committee welcomes and accepts nominations from the membership year round. Nominations from the chapter should include a detailed letter of recommendation and curriculum vitae (CV). Additional letters of support are welcome and may strengthen the nomination.

Send nominations, CVs, and letters of support to: Texas Chapter of the American College of Physicians, Awards and Recognitions Committee, 401 W. 15th St., Austin, Texas 78701; or email to gena@taim.org.
**MEMBER KUDOS**

Kathleen Fallon, MD, Round Rock, was elected to the Texas Medical Association’s council on medical education for a three-year term.

Ghassan Salman, MD, FACP, Austin, was elected to the Texas Medical Association’s council on scientific affairs for a three-year term.

Ron J. Anderson, MD, MACP, Dallas, has been named to the American Hospital Association’s Board of Trustees.

John C. Baldwin, MD, FACP, Lubbock, was appointed to the Select Commission on Higher Education and Global Competitiveness by Lt. Gov. David Dewhurst. The commission is charged with examining various issues relating to higher education, including structuring higher education funding to reward student and institutional outcomes that are aligned with state and regional priorities.

J. James Rohack, MD, FACP, Temple, recently was named president-elect of the American Medical Association. He will assume the presidency in June 2009, followed by a term as immediate past president ending in 2010. Rohack was also named UTEP 2008 Distinguished Alumni.

Robert L. Levine, MD, FACP, Bellaire, has been recognized by the American College of Emergency Physicians as a Texas hero for emergency medicine.

Zack Mahdavi, Austin, third-year UTMB medical student, developed a medical calculator for the iPhone called Mediquations.

Send news of your accomplishments, or that of a colleague, to: Gena Girardeau, Executive Director, 401 W. 15th St. Austin, TX 78701; fax to (512) 370-1635; or email gena@taim.org.

**Governor’s Message (continued from page 1)**

Here’s what we’ve learned: those having an opinion prefer to hold the meeting in an urban area near cultural attractions, rather than at a resort hotel offering golf and other activities. Reasonable room rates are valued more than the range and quality of hotel amenities. A Saturday-Sunday schedule is favored over Friday-Saturday, especially by our younger members. Overwhelmingly, respondents consider the availability of CME credits (including those for ethics) important in deciding whether to attend. There is little enthusiasm for organized social programs for spouses and kids.

We asked where our members would like to go. Some 84% rated Austin as very desirable or desirable, followed by San Antonio (76%), Dallas (75%), Houston (68%), Fort Worth (58%), and Galveston (37%). Other cities drew fewer votes.

With regard to elements of the scientific program, it’s clear that potential attendees prefer presentations that focus on diagnosis and therapeutics. Younger physicians are more interested in the management of hospitalized patients, while their elders seek updates in office-based practice. A large majority sought presentations in neurology, urology, and musculoskeletal syndromes, while updates on the business aspects of practice garnered little enthusiasm. Respondents – especially the younger ones asked for a CD that includes all the speakers’ handouts, rather than a paper syllabus.

The ACP is offering a number of Clinical Skills modules for use in Chapter meetings; the module on arthrocentesis and joint injection was heavily subscribed at the Dallas meeting. Pain management for the internist and the sports medicine musculoskeletal examination were the most requested modules for a future Texas Chapter meeting. Younger physicians asked for sessions on skin biopsy techniques and the female examination far more than their older colleagues.

Finally, a majority favored adding an open “Town Hall” session with ACP national and Texas Chapter leaders to address ACP policies and the status of internal medicine practice. This would be a new feature for our meeting.

Let me assure you that these survey results will be taken seriously, both for planning the next meeting and those beyond. If you didn’t respond before, the polls are still open! You can cast your vote at: www.surveymonkey.com/s.aspx?sm=tysYq_2bxfAxBR37HpMxcMvw_3d_3d

Please mark your calendars now for our 2009 Texas Chapter meeting, to be held November 14-15 at the Hyatt Hill Country Resort and Spa in San Antonio. We will do our utmost to respond to your input. See you there!

[Thanks to Ms. Claire Hogan, Chapter staff, for preparing, distributing, and tabulating our survey.]
Preceptors recognized with Decade of Service Award

Twelve outstanding preceptors received the GIMSPP Decade of Service Award at the Texas Chapter annual meeting. These community-based internists have the distinction of being in the program for 10 years and teaching and mentoring young medical students at least seven of those years. This brings to 48 the total number of winners since the Decade of Service Award was established in 2005. The dramatic black plaque recognizes their invaluable contribution to the education of the future physicians of Texas.

Here are this year’s winners:

- Ambrone Aboud, MD, FACP, El Paso (11 students)
- Mark L. Bing, MD, FACP, Katy (Eight students)
- George G. Burnazian, MD, Houston (13 students)
- Natini M. Dave, MD, Bryan (Nine students)
- Alan G. Kaye, MD, Dallas (14 students)
- Caroline N. Mbogua, MD, Houston (11 students)
- Thuan K. Nguyen, MD, Houston (13 students)
- James E. Race, MD, Dallas (Nine students)
- Edward R. Sargent, MD, FACP, San Antonio (Eight students)
- Randalee Smith, Jr., MD, FACP, Dallas (Eight students)
- Thuong V. Tran, MD, FACP, Houston (17 students)
- Trevor H. Turner, MD, Round Rock (14 students)

“He is an amazing physician. I learned more than I could have ever imagined and I know that this knowledge will help me stand out during the clinical years.”

“He has a great teaching technique no matter the student’s level of knowledge. He is very easy to talk with and simply listen to and learn from.”

“He is extremely knowledgeable...moreover, he exudes outstanding interpersonal skills which I want to emulate when I practice medicine in the near future.”

“Every moment from this preceptorship has been valuable. I am now deeply interested in pursuing IM where I never had such an interest before.”

“She presented a complete picture of how her practice works and a wonderful overview of all internal medicine has to offer. She allowed me to do many things alone and then corrected my technique and presentation skills.”

“I see him as an incredible person who deserves thanks for his selfless work in an area underserved and underfunded in the Dallas medical community.”

“I feel more prepared and comfortable in being around actual patients. It was a pleasure shadowing him and his practice reflected very highly on internists.”

“Throughout this preceptorship I have heard numerous times from various people that he is one of the best teachers to work with. I feel blessed to shadow such a passionate doctor who is kind to his patients, staff, and especially to me.”

Texas A&M and Texas Tech Sponsor Preceptorships

Alejandro C. Arroliga, MD, FACP, Interim Chair of Internal Medicine at the Texas A&M University System Health Science Center, has provided a sponsorship of $2,100 so two additional students from his school can participate in GIMSPP rotations next summer.

Cynthia Jumper, MD, MPH, FACP, Chair of Internal Medicine at Texas Tech University Health Sciences Center, has again given $2,000 so that more students from the Lubbock school can benefit from preceptorships.

Dr. Arroliga and Dr. Jumper’s gifts demonstrate the importance they place on academic Internal Medicine departments’ taking the lead in recruiting students to this exciting field of medicine.

Eugene W. Stokes, MD, FACP and Karen Szauter, MD, FACP, Co-Chairs of the Medical Students Committee, Govs. Armstrong, Diehl, and Gregg and the GIMSPP staff thank Dr. Arroliga, Dr. Jumper, the A&M University System and Texas Tech University Health Sciences Center for the continued support of this vital program.
**Texas ACP Services working for funding for GIMSPP**

With every legislative session the key issue is always the state budget. And that truism is especially pertinent in 2009. Even though legislators coming to Austin were expected to be greeted with news of a revenue surplus, competing interests ranging from transportation infrastructure to higher education to health and human services have submitted funding requests that taken together would eat up all of that new money and any more than might materialize before the legislative session adjourns in May.

For the Texas Chapter of the ACP the request for funding is almost miniscule. In a two year state budget that is expected to top $168 billion, our priority funding request is only $2 million for the Statewide Primary Care Preceptorship Program. With a portion of that relatively modest sum, our General Internal Medicine Statewide Preceptorship Program will benefit and be able to place up to 200 medical students into an internal medicine practice per year. A recent Texas ACP study of former GIMSPP students revealed that participation had a positive influence on their decision to pursue an internal medicine residency.

One challenge, however, to advocating for such a low-dollar request (at least by state budget standards) is making sure it does not get lost in the rough and tumble of the appropriations process. Be assured that Texas ACP Services is working diligently to ensure that the Chapter’s needs from lawmakers are addressed. But nothing is more effective in getting the attention of elected officials than the voices of their Texas ACP key contacts and physician constituents from around the state and their districts.

That’s why it is so important to reach out to your local state representatives and senators by phone, email or personal visit to educate them about GIMSPP and the need to restore funding to $2 million. The Texas ACP Services has decided to participate as a group during the first TMA First Tuesday physician lobby event on February 3, 2009. During First Tuesday, physicians from across Texas will descend on the Texas Capitol in their white coats to lobby the Texas Legislature on issues critical to medicine.

The “White Coat Invasion” was key to physicians’ successes in the Texas Legislature in 2003, and 2005, and again in 2007. Physicians make a big impression when they show up en masse at the Capitol. Our senators and representatives listen when their hometown doctors show up in their offices. It’s the perfect time to be a part of the action to lobby for GIMSPP.

Please contact me if you are interested in participating in a future First Tuesday so I can get you more detailed information or if you would like to hear more on legislative issues affecting Texas ACP during the 81st Texas legislature. I can be reached at (512) 370-1367 or at michelle@taim.org.

**President’s Message (continued from page 1)**

aspects of practice with the latter offering incentives for certain behaviors. There is nothing fancy here, just the reality of medical practice in the 21st century.

Next, we must “matter” to politicians. Our congressmen, senators and presidents all have physicians and for at least some of them, the relationship they have with their personal physician can have a powerful impact on their decision making. The difficulty of course, is that they are generally not constrained by limited access and other challenges many of our patients face. They do respond to compelling stories however. We invited our US Congressman to visit our office and we spent an hour discussing quality of medical care, the value of electronic medical records and barriers patients face in our current system. We hosted a fundraiser for a presidential candidate last fall and had breakfast with him and two of our Medicare patients. It was a great opportunity to spend a half hour discussing the problems created (for both patients and physicians) by Medicare rules, paperwork and reimbursement that have not kept pace with inflation. We all know, “out of sight, out of mind” and we cannot afford to be far from the fore in the political process as healthcare issues are decided and federal and state budget priorities are set.

So, we have relationships to manage on multiple levels but no great house is constructed on a weak foundation. Our patients recognize our value but we must not forget to keep them informed. We will either lead the P4P programs or be led into them. This is a car we’d best drive. And as state and federal politicians start to change rules and spend money, we need to be there to advocate for our patients and profession.

The key to success in all of these areas is that we must lead and manage and foster relationships with the same vigor and focus we apply to patient care.

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**Medical Students and Associates Compete at Annual Meeting**

A spirit of camaraderie and excitement was palpable throughout the many activities planned specifically for the more than 85 medical students and residents who attended the Texas Academy of Internal Medicine Annual Scientific Meeting in November 2008.

The medical student clinical vignette contest was highly competitive, providing a challenge for the judges to select a single first-place winner. **Evan Hardegree**, TAMHSC, won with his presentation, *My Head Hurts: A Cryptogenic Cluster of Confounding Characteristics.*

Coming in a close second was **Brent Lacey**, UTHSCSA. Third place went to **Ashwini Kolmarla**, BCM. The top three received cash prizes. Hardegree will advance to the national competition with an all-expense paid trip to Philadelphia, compliments of the Texas Chapter, Co-chair of the TXACP Medical Students Committee, **Karen Szauter**, MD, FACP, Galveston, once again devoted many hours to planning and hosting the student activities.

The Associates clinical vignette competition featured five residents who were selected in their regional competitions to compete (continued on page 6)
Medical Students and Associates Compete

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at the statewide meeting: Nicolas A. Melgarejo, MD, UT Houston; Afua S. Agyarko, MD, Methodist Hospital Dallas; Jose D. Burgos, MD, TTUHSC-El Paso; Sobia Ahmad, MD, TTUHSC-Amarillo, and Marc S. Elieson, MD, TAMHSC-S&H.

Dr. Burgos won the competition with his vignette, The Brain Puzzle and will receive an all-expense paid trip to Philadelphia to represent the Texas Chapter at the national level competition during the ACP Annual Session in April.

In a dramatic conclusion to the annual Doctor's Dilemma competition, the team from Baylor University Medical Center at Dallas emerged as champions. Team captain Dan Richey, MD, led his team members to victory: Anu Tandon, MD, and Karen Steffer, FACP. The Baylor-Dallas team will represent the Texas Chapter in the Doctor's Dilemma competition at the ACP Annual Session in Philadelphia this April. Congratulations are also due to the Baylor College of Medicine team that took second place. Special thanks go to Drs. Suma Pokala, FACP, Temple, and George Crawford, FACP, San Antonio, for organizing this event and to Drs. Kent DeZee, FACP, El Paso, Jose Perez, Jr., FACP and Andy Diehl, FACP for their assistance.

During the third competitive year in the annual poster contest, over 80 abstracts were submitted from medical students and Associates. The 35 selected submissions came from four Texas medical schools and nine residency programs. Attendees were allowed

On Being a Doctor (continued from page 1)

him. “Before you leave, I have a letter for you that she wanted you to have.” That's strange, why would she have written us a letter?

I opened the envelope, which looked surprisingly older and more tattered than I would have expected. I looked at the date. She wrote this more than four years ago! Curiosity was starting to overwhelm me. I began to read aloud:

Dear first year medical students,

One wonders how much time will have passed at the point when you are reading this letter. Two weeks? Two months? Two years? I have begun lately to value time and wish for more. I suppose I should probably start with an introduction. My name is Ruth Ashland. I'm 61 years old, and I've just recently been diagnosed with brain cancer.

My oncologist tells me that it's advanced, but he is optimistic. I'm heading in surgery on Tuesday, followed by radiation and chemotherapy over the upcoming months. I must admit, I'm more than a little nervous. I've never been really good at assuming the role of a patient. I suppose this is what comes of a lifetime spent being a doctor. I'm a neurologist by training, though next week I'll find myself in a hospital bed, instead of standing beside it. It's likely to be disorienting, and goodness knows I'm already starting to feel like a fish out of water. People say that doctors make the worst patients, but I'm determined to be as cooperative with treatment as I can.

What would it be like to be a patient of mine right now? “Let's take it one step at a time. There's just no telling how well this will work, but we're optimistic.” My doctor just said nearly those same words to me. I was surprised by how much it meant to me to hear him say it. Until he said that, I hadn't really dared to hope for a good outcome. I'm still uncertain about the future, but I really have begun to feel hopeful. I guess I needed that encouragement pretty badly.

Perhaps over the years I have begun to take hope for granted. I always deliver that same, somewhat rehearsed speech to my patients, but that encouragement must seem 10 times more important when the patient knows only the fear and uncertainty of the unknown. At least I know the science and medicine of the case. How hard it must be not to be able to use intellectualization as a defense mechanism. When I become your first patient, some years from now I hope, I think that's the most important lesson you can learn from me—give your patients hope. Encourage them with your empathy and understanding. Don't give them false hope when the prognosis is dismal, but empower them to feel that there is a reason to keep fighting.

Now that I am a patient, I believe I have a much greater capacity to be a teacher. My days in medicine are over, but perhaps I can offer you future physicians a few more lessons before I hang up my stethoscope for good. In my years in medicine, I know I learned countless more lessons from patients than from books or lectures. My hope is that you learn from your patients and from me, and that these lessons will continue to enhance your learning for the rest of your career.

I hope that I have provided some education to you this year. I'm sorry if the brain dissection lab was a mess for you, but I'm afraid that my condition may make that particular specimen less than ideal. I am sorry about that. I hope you have been able to use me as a resource. You might find me a valuable source of information, now that I have lived as a teacher, a doctor, and a patient. I am proud to have been your first patient, serving as a springboard to what I pray will be a bright and prosperous career. Remember that your first responsibility always is to care for your patients, and don't forget that you may learn more from them if you allow it than any book or professor will teach you. Remember, above all else, to give them hope.

All the best,

Dr. (and patient) Ruth Ashland

I tucked the letter back in its envelope. “Thank you, Dr. Ashland. I'll remember, I promise.” I walked to her feet and firmly grasped the levers I found there. Respectfully, solemnly, we lowered her into the formaldehyde-filled tank and closed the lid. I turned back after I reached the door to leave the anatomy lab. “We'll be back Monday. I'm already thinking of new questions for you.”

Congratulations Brent Lacey, our 2008 On Being a Doctor competition winner. Brent is currently a medical student at the University of Texas Health Science Center in San Antonio.
Chapter Elects Officers, Directors

Officers and board members for Texas Chapter of the ACP and Texas Chapter of the ACP Services, the Texas Chapter’s advocacy arm, were elected during the annual awards and business meeting luncheon November 15, 2008, in Dallas.

The following members were elected to the TXACP Board of Directors for three-year terms to represent the following regions:

**Directors**

- Noel O. Santini, MD, Dallas – Northeast Director
- Allan R. Kelly, MD, Fort Worth – Northwest Director
- Jose A. Perez Jr., MD, FACP, Houston – Southeast Director
- Cecil M. Bourne MD, FACP, Corpus Christi – Southwest Director
- Ana I. Rodriguez, MD, San Antonio – At-Large Director

**Officers**

- TXACP President: Scott W. Yates, MD, MBA, FACP, Plano
- TXACP Services President: Felicia Austin-Tolliver, MD, FACP, Angleton
- TXACP President-elect: Steve Urban, MD, FACP, Amarillo
- TXACP Secretary-Treasurer: Randall Rosenblatt, MD, FACP, Dallas
- TXACP Services President-Elect: Victor Simms, MD, Pearland
- TXACP Services Secretary-Treasurer: W. Gary Reed, MD, FACP, Dallas

Medical Students and Associates Compete

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to view and discuss the research and case presentations at Saturday evening’s reception.

Thanks to the work of dedicated TXACP volunteers who judged the posters, the following winners were announced during the reception:

**Medical Students**

**Clinical Poster Winners:**
1st place: Amanda Wlotchoff, UTHSCSA
2nd place: Ryan McConnell, BCM

**Research Poster Winners:**
1st place: Jameel Johnson, BCM
2nd place: Brian Keller, UT Southwestern

**Associates**

**Clinical Poster Winners:**
1st place: Sameer Islam, MD, TTUHSC-Lubbock
2nd place: Jessica Eichinger, MD, Wilford Hall Medical Center

**Research Poster Winners:**
1st place: Nishant Shah, MD, BCM
2nd place: Cesar Garcia, MD, UTHSCSA

For more information and photos, visit the annual meeting page at www.taim.org.

**First Tuesday**

We would like to thank the following physicians for taking time out of their busy schedules to lobby for the Primary Care Preceptorship Program, during the Texas Medical Association’s First Tuesday on February 3. Texas ACP made a positive impact and will continue to do so as we progress through the session.

- Andrew Diehl, MD, FACP, San Antonio
- Felicia Austin-Tolliver, MD, FACP, Angleton
- Ned Snyder, MD, FACP, Galveston
- Robert Jackson, MD, FACP, Houston
- Scott Yates, MD, MBA, FACP, Plano
- Sue Bornstein, MD, FACP, Dallas
- Victor Simms, MD, Pearland

For more information on First Tuesday, please contact Michelle Romero at michelle@taim.org or 512-370-1367.

**Save the Date**

Texas Chapter of American College of Physicians

Annual Scientific Meeting 2009

Hyatt Hill Country

Nov. 14-15, 2009
Please send me information on the General Internal Medicine Statewide Preceptorship Program.

Name ________________________________________________________________

Office Address ________________________________________________________

City __________________________________________ State ________ Zip ________

Office Phone: ________________________________ Office Fax: ______________________

Office Contact: __________________________________________________________________

Fax form to (512) 370-1635, or mail to Texas Academy of Internal Medicine, Attn.: Preceptorship Program, 401 West 15th St., Austin, TX 78701